

Paying for your care

Autumn 2024

Where to get independent financial advice

Paying for ongoing care can be an expensive and long term commitment, especially if you need permanent care in a care home.

Before you enter into any care arrangements, the council strongly recommends that you seek independent financial advice from a financial adviser who is registered with the Financial Conduct Authority and accredited with the Society of Later Life Advisers (SOLLA).

The Care Advice Line

The council has commissioned The Care Advice Line to provide free, confidential, personalised financial advice about paying for care and support. Anyone can use this free service regardless of income to find out about:

- options for paying for care now or planning for the future
- benefit rates and entitlements

The Care Advice Line can also help you to access specialist financial or legal advice. You can contact them via:

Website: www.thecareadviceline.org/gloucestershire Tel: 01452 222200

Consider making a lasting power of attorney

A lasting power of attorney (LPA) is a legal document that lets you appoint someone (your 'attorney') to help you make decisions or to make decisions on your behalf if you become unable to do so. This gives you more control over what happens to you in the future. Making an LPA can avoid delays in making decisions for you in the future and may also make things easier for your family.

There are two types of LPA. You can make one type or both.

- A health and welfare LPA gives your attorney the power to make decisions about your daily routine (such as washing, dressing, eating), your medical care, moving into a care home or life-sustaining treatment. This LPA can only be used if you lose mental capacity to make this kind of decision for yourself.
- A property and financial affairs LPA can be used with your permission as soon as it is registered. It gives your attorney the power to make decisions about money and property for you, for example managing your bank account or building society account, paying your bills, collecting your benefits or pension, selling your home.

Both types have to be registered before they can be used. There is a fee for registering each LPA but you may be eligible for a reduction or exemption.

See the GOV.UK website www.gov.uk/power-of-attorney for more information about making an LPA and about fees, reductions and exemptions.

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Introduction

This booklet is about paying for your care and support and about charging and financial assessment in Adult Social Care.

We recommend that you take independent financial advice about your options for paying for care and support before entering into care arrangements.

Paying for care and support

Social care for adults is hardly ever free. Means tested charges apply to almost all care and support arranged or provided by the council. If you have had a Care Act assessment and the council has agreed to meet your eligible needs, we will:

- calculate how much this will cost. The total cost is called your personal budget
- ask you to have a financial assessment if charges apply.

The financial assessment is a national means test which we use to determine how much you must pay towards your personal budget. Most people will have to pay something towards the total cost and the council will pay the balance. Some people will have to pay the full cost. Some people will not pay anything.

The Financial Assessment and Benefits (FAB) team assess how much someone will have to pay fairly and in accordance with both council policies and National Government guidelines.

You can estimate how much you might have to pay by using the council's online calculator. This is free, confidential and easy to use.

<https://gloucestershire.mycostofcare.com/OFA>

You can use your personal budget in several ways when the council is meeting part of the cost of your care and support:

- You can ask the council to make all the arrangements for you
- You can apply for a direct payment so that you arrange your own care
- You can have a combination of the two.

Section A: What you won't have to pay for

Regardless of your financial circumstances, there are some services that you do not have to pay for.

Adult Social Care services which are provided free of charge

You do not have to pay for these services from the council:

- information and advice
- assessing or re-assessing your care and support needs, helping you to plan your care, reviewing your plan
- your financial assessment, re-assessment or advice from the FAB Team
- meeting the eligible needs of carers. This includes carers of adults who are self-funding their own care.

Exceptions to charges for care and support

We will not charge you for your care and support if you:

- have Creutzfeldt-Jacob Disease, or
- are aged 18 or 19, still in full-time education and your parents still receive child benefit for you.

We will not charge you for:

- community equipment. This means aids or minor adaptations (costing £1,000 or less) to your home to help you be safer and more independent
- after-care provided under S117 of the Mental Health Act when you leave hospital. While you are receiving S117 after-care, we won't charge for care and support arranged under the Care Act. You will have to pay for care and support if you still need it when your S117 after-care is withdrawn.

- a time limited period of intermediate care. This is short term, intensive support to help you maintain or regain your independence as quickly as possible. It may be provided:

- to prevent you being unnecessarily admitted to hospital
- as a 'home first service' when you are discharged from hospital if you need care and support while you recover or while any longer term needs are assessed
- as 'reablement support' to help you relearn or regain your ability to carry out daily living tasks to prevent, reduce or delay needs for care and support.

Most people only need intermediate care for about 1 or 2 weeks but if necessary it can continue free of charge for up to six weeks. Intermediate care will stop when assessment confirms that:

- you have achieved your goals, or
- you are unable to make more progress, or
- you need ongoing health and / or social care support.

You will have to pay for any care and support that you need when your intermediate care period ends.

Non means tested NHS funded care

The council will not charge you for any care and support which the NHS has a duty to provide.

Some people with severe, primarily health related needs may be eligible for funded care through the NHS.

If you have long-term complex health needs, you may qualify for NHS Continuing Healthcare (CHC). This is free social care arranged and funded by the NHS.

CHC can be provided in a variety of settings outside hospital, including in a care home or in your own home.

Eligibility depends on assessed needs not on any particular diagnosis or condition. Needs are assessed by a multi-disciplinary team which usually involves both health and social care assessors. Then an Integrated Care Board (ICB) makes the eligibility decision. Eligibility may change if your needs change.



There is more information on the NHS website: <https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/nhs-continuing-healthcare/>

You may be eligible for NHS-funded nursing care (FNC) if:

- you live in a care home that provides nursing care and
- you're not eligible for CHC but have been assessed as needing care from a registered nurse.

If you are eligible, the NHS will pay a flat rate towards the cost of your nursing care directly to the care home. You will still have to pay your means tested contribution (determined by your financial assessment) towards the cost of your care and support.

There is more information on the NHS website: <https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/nhs-funded-nursing-care/>

Section B: Your financial assessment

Consent to financial assessment

We will ask you to sign a form to agree to or decline to have a financial assessment when:

- the council has agreed to provide or arrange your care and support (including when you have a direct payment) - see the council's direct payments webpage <https://www.goucestershire.gov.uk/direct-payments/> and
- there is a charge for meeting your needs.

Please sign and return the consent form to us within four weeks. We are unable to complete the financial assessment without this.

We will determine that you are willing to pay for the full cost of your care and support if:

- you don't wish to have a financial assessment (for example if you know that you won't qualify for financial support because your resources are over £23,250), or
- you don't return the consent form to us within four weeks and there is no good reason for the delay.

You can still request a financial assessment if you change your mind or your circumstances change. We will assess your ability to pay for care and support from when you provide consent.

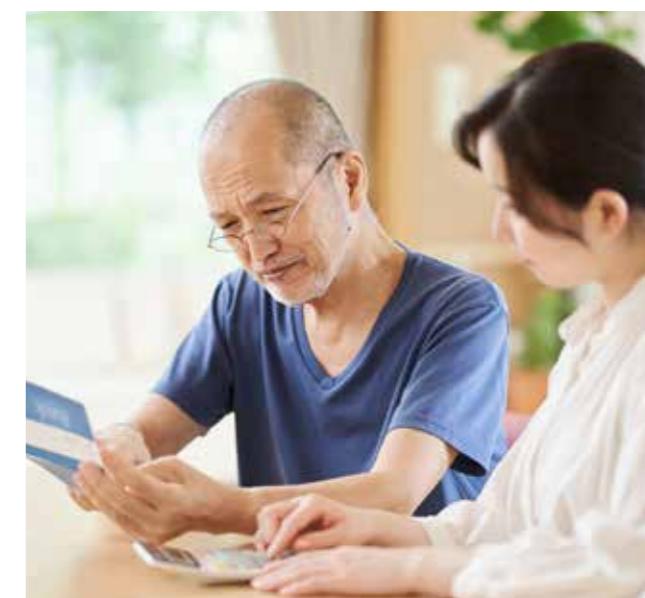
Consent for someone else to manage your financial assessment or care payments for you

When we ask for your consent to have a financial assessment, we will also ask if you have someone who manages your money for you or if there is someone you would like to deal with your financial assessment for you. If you do, we will ask you to sign a consent form to allow us to contact them directly. Often this person is a family member.

You remain legally responsible for paying for your care and support unless the person managing your money is your 'legally appointed representative'. This means someone who:

- holds a registered power of attorney which authorises them to make financial decisions for you, or
- is a Deputy appointed by the Court of Protection.

We will want to see evidence of authority if the person managing your money / payments is your legally appointed representative or is a Department for Work and Pensions Appointee (someone authorised by the DWP to deal with your benefits).



How a financial assessment is completed

When your social care assessment is completed and if you qualify to receive help from us, we may offer you a personal budget. You will then be asked to complete a means tested financial assessment to calculate if you will be required to pay towards the cost of your care.

We will determine that you are willing to pay for the full cost of your care and support if you don't wish to have a financial assessment.

- Step 1:** Someone from our social care team will contact you. We will talk to you about your needs and work with you to find out what services will best help you to live a more independent life.
- Step 2:** You can estimate the amount you might have to pay each week using our online financial assessment calculator here <https://gloucestershire.mycostofcare.com/OFA>
- Step 3:** You can complete your financial assessment in different ways. The easiest way is to submit your financial assessment online through the online financial assessment calculator by following the instructions. Or we can arrange an in-person visit / telephone assessment.
- Step 4:** Your financial assessment is then completed by a member of the Financial Assessment and Benefits Team. We will write to you to tell you the amount you will need to pay towards your care.
- Step 5:** The easiest way to pay is through a monthly direct debit, however all payment options will be available on your invoice.

Your financial assessment – what we take into account

We use your financial assessment to determine the maximum weekly amount you will be expected to pay for your care and support.

We will ask you to provide proof of your financial situation, for example bank statements, evidence of your costs. If you don't supply this within four weeks and there is no good reason for the delay, we may determine that you are willing to pay for the full cost of your care and support until you supply the information we need.

The FAB team will also check that you are getting all the benefits you are entitled to. We will explain how to claim any you haven't applied for.

Financial assessments differ slightly depending on the type of care and support that you need. The information below applies to all financial assessments. Please also read the sections that apply if you need:

- permanent care in a care home - see Section C page 11 or
- care in a non-residential setting - even if you sometimes need a short break or respite care in a care home. See Section D page 13.

We take both capital and income into account in your financial assessment. The assessment is only about your capital and your income. We won't include income or capital that belongs to your partner or anyone else in your household. If you have joint income or joint capital, we will only count your share.

Your capital includes assets and savings such as:

- cash, bank, building society and savings accounts
- investments, stocks and shares
- savings certificates or bonds
- property, buildings or land that you own or have a share in.

We do not include the value of personal possessions such as furniture or jewellery.

Your income: We do not take into account earnings from work or the mobility element of Personal Independence Payments or Disability Living Allowance but we do include other income, such as:

- state and private pensions
- dividends and interest as well as funds you receive from other sources such as trusts or benefits
- state benefits such as Pension Credit, Income Support, Attendance Allowance (AA), Disability Living Allowance (DLA), Personal Independence Payments (PIP). We count entitlement in your assessment even if you don't claim as this income is available to you on application
- rents from property or land.

If the value of your capital is between £14,250 and £23,250 (not counting your home), we apply a formula to the value to calculate a weekly figure for charging purposes. This is called 'tariff income'. It is included as income in your assessment.

Your costs: We take certain costs into account before we decide how much you can afford to pay for your care, such as:

- mortgage payments
- rent payments that are not met by housing benefit
- council tax that is not met by council tax benefit
- home and buildings insurance
- disability related expenditure not met from other sources. These are additional costs that you incur as a result of a disability or a long term health condition.

The result of your financial assessment

We will write to you when we have completed your financial assessment. Our letter will confirm the maximum weekly amount you will be expected to pay towards your care and the date you have to pay from.

As a general guide, if your capital or savings are:

- £23,250 or less - you are likely to have to pay something towards the total cost of your care and the council will fund the balance.
- more than £23,250, you will not be eligible for help from the council to pay care costs until your resources fall below £23,250. Please see Section G page 16 Self-funding your own care.

What to do if you think we made a mistake

If you think we have miscalculated your assessment or you forgot to tell us about something, please:

- tell the Visiting Officer who completed your assessment, or
- ask to speak to the Lead Officer instead.

You can also ask us to review your financial assessment. The review will be carried out by a different Visiting Officer.

If you are still dissatisfied after the review, you can appeal for your case to be considered by a financial review panel, or use our Adult Social Care complaints procedure. We will help you to use it if you need help.

The council's complaints webpage: <https://www.gloucestershire.gov.uk/complaints-ASC>

Reviews and changes to your circumstances

Please contact the FAB Team straight away if your financial circumstances change as this may affect how much you have to pay.

You may have to pay backdated charges if you delay. We will reassess your financial circumstances to make sure you are paying the right amount.

We will also review your charges if you need a different type of care.

The Department for Work and Pensions increases state benefits in April in most years. We will reassess your contribution when this happens. We will write to you if your contribution changes. You can ask us to reassess your financial circumstances if you think your assessment is no longer accurate.

Disability Related Expenditure (DRE)

Disability Related Expenditure means the additional costs that someone with a disability or long term health condition may incur as a result of their disability or condition. Although we usually check whether additional costs are covered in the care plan, DRE is not restricted to costs related to eligible needs. DRE includes any additional costs incurred as a result of a disability or ongoing condition.

In general, disability related expenses are considered when:

- the extra cost is needed to meet your specific need due to a medical condition or disability, as identified in your care and support assessment of needs; and
- the cost is reasonable and can be verified; and
- it is not reasonable for a lower cost or free alternative item or service to be used. If a lower cost alternative item or service could have been used, the expense considered will be the lower cost.

We want to see evidence of this by way of receipts, please have these ready for your assessment.

Examples of DREs

DREs can include, but are not limited to: Extra washing, community alarms, special clothing, or extra wear and tear, buying and maintaining disability-related equipment, extra heating costs, gardening, therapies, cleaning, dietary needs, additional bedding, day or night care not being arranged by the local authority, extra transport costs

We won't consider costs for general items or services required for daily living and used by the general population.



Section C: If you need permanent care in a care home

This section applies if you need permanent care in a care home.

Benefits when you move into permanent care

We will notify the Department for Work and Pensions (DWP) when you move into permanent care if you receive Personal Independence Payments, Disability Living Allowance and Attendance Allowance. These benefits stop after four weeks in care. This is why your care home charges for your first four weeks in care are different from the rest of your stay.

There are some things that you must do when you move into permanent care and you receive benefits:

- You must report your change in circumstances to the DWP. They will tell you how your other benefits will be affected
- You must tell your local council if you receive Housing Benefit and Council Tax reductions. These stop after a four week notice period when you move into permanent care
- Your partner's benefits or benefit entitlements may be affected when you move into care. Partners should talk to:
 - The DWP about benefits they may be entitled to
 - Your local council about a council tax reduction if they will be living alone when you move into care.

We will take your partner's circumstances into account in your financial assessment so that they do not suffer hardship when you move into permanent care.

Personal expenses allowance

You are likely to have to pay most of your income towards the cost of your care if the council is helping to pay costs. We will not leave you with less than the personal expenses allowance (PEA) set annually by central government.

The PEA is intended to cover personal costs which are not part of your care, such as toiletries, clothes, hairdressing and presents.

If you own your own home

If you own your home, we will include the value of your home in your financial assessment unless a property disregard applies. A property disregard means that the value of your property is not counted in your financial assessment either on an ongoing basis or for a period of time.

Property disregards

The most common property disregard applies when your partner (or certain other relatives) live in your home with you and they will continue to live there when you move into care. The effect of the disregard is that we won't include the value of your home in your financial assessment while your partner / qualifying relative lives there. Please contact the FAB Team straight away if they move out of your home as this will affect your charges. You may have to pay backdated charges if you delay.

If this type of property disregard does not apply to your situation but your capital (not counting the value of your home) is less than £23,250, we will disregard the value of your home during your first 12 weeks in permanent care.

This means that for your first 12 weeks in permanent care:

- you will pay an assessed amount (determined by your financial assessment), and
- the council will fund the balance agreed in your plan.

When the 12 week period ends, you become responsible for funding the full cost of your care unless you have made arrangements with the council to have a deferred payment agreement. Please note that if you sell your home within your first 12 weeks in permanent care, the property disregard will end on the date of sale.

Deferred payment agreements

A deferred payment agreement is an option for paying for your care if you are a homeowner with limited savings or other capital. It is a loan from the council to pay care home costs. The loan is secured against your home with a legal charge. The amount you can borrow depends on the value of your home and the equity you have in it.

You may be eligible for a deferred payment agreement if:

- you have eligible needs for permanent care in a care home, and
- your capital or savings (apart from the value of your home) are less than £23,250, and
- you don't qualify for an ongoing property disregard.

You can apply for a deferred payment agreement when:

- you first move into permanent care or
- your funds drop below £23,250 if you are already living in permanent care.

When you have a deferred payment agreement, each month:

- you pay the assessed amount to the council
- the council pays the amount agreed in the deferred payment agreement
- anyone paying a top up (see below) pays the amount agreed by the council.

Every month, care costs paid by the council are added to the debt to the council. Interest and other council charges (such as administration fees) are also added - unless you have agreed to pay these separately. This means that the debt to the council increases over time.

You can repay the debt at any time but it must be repaid when you sell your home.

You may decide not to sell your home during your lifetime, but the debt must be repaid within a fixed period after death to avoid legal action being taken. See the council's Deferred Payment Agreements policy and FAQS webpage:

<https://www.goucestershire.gov.uk/deferred-payments-agreement/>

Top ups

The council will only pay what is necessary for the level of care that you need.

You may be able to live somewhere more expensive if someone (usually a family member or another third party) can 'top up' the difference between what the council will pay and the actual cost.

You can only pay a top up with your own money:

- during a 12 week property disregard period (see page 11), or
- when the council has agreed a top up as part of a deferred payment agreement, or
- when your care is arranged as after-care under section 117 of the Mental Health Act.

Top ups are a financial commitment:

- anyone who wishes to pay a top up will have to sign an agreement with the council to pay the top up for as long as you need care
- care home fees (and the top up) may increase during this time
- there are consequences if the top up is discontinued. The council will continue to meet your needs but we may have to consider moving you (subject to a risk and needs assessment) to a care home that does not require a top up.

Please see the council's Your Circle top ups webpage for more details:

<https://www.yourcircle.org.uk/Information/topup>

Section D: If you need care in a non-residential setting

This section applies if you need care in your own home or in community based settings such as extra care housing, supported living accommodation or in Shared Lives arrangements. It applies even if you sometimes need a short break or respite care in a care home.

Your home and daily living costs

If you own your home, we will not include the value of your home in your financial assessment for non-residential care. We may take the value of your home into account if you need temporary care in a care home for more than 52 weeks. We will not leave you with less than the national minimum income allowance for daily living costs after paying for your care.

Notice periods and charges if you cancel your care

We will continue to provide support and charge you for it unless:

- you tell us that you don't need it, or
- you are assessed as no longer being eligible for support.

Please contact the Adult Helpdesk and give us two weeks notice if you are going to be away and won't need support, for example if you will be on holiday or have a planned hospital admission. We will cancel your support while you are away.

Please note that cancellation will not reduce your charges unless cancellation reduces the actual cost of your care to below your assessed charge. This is because the amount you pay only covers part of your care costs.

Example

George pays £100 per week towards care which actually costs £630 per week (£90 a day). If George is away for 2 days, his care for the remaining 5 days will still cost £450 so George will still have to pay £100 for his care that week. But if George is away for 6 days, his care for the week will only cost £90 (1 day) so George will only pay £90 for that week.

If you live in supported accommodation and you share care arrangements with people that you live with, you must still pay shared care costs while you are away. This is because your placement and the care services that support it have to continue while you are away.

If you need a short break/ respite care in a care home

We will not include the value of your home in your financial assessment if you sometimes need a short break or respite care stay in a care home. We may take the value of your home into account if you need temporary care in a care home for more than 52 weeks.

We will make allowances for your essential ongoing living costs while you are in temporary care unless these are covered by benefits. If you receive benefits, there are some things you must do to avoid overpayment while you are in respite care.

You must tell the Department for Work and Pensions (DWP) so that they can adjust your entitlements. For example, Personal Independence Payments, Disability Living Allowance and Attendance Allowance will stop after four weeks in care.

You must also tell your local council if you receive benefits for Housing and / or Council Tax. These may be affected if you stay in a care home for more than 13 weeks.

Your partner's benefits or benefit entitlements may also be affected while you have a short break or respite care. Partners should talk to:

- the DWP about benefits they may be entitled to
- your local council about a council tax reduction if they will be living alone while you are in temporary care.

Section E: Your care charges

Charging starts on the day your care and support begins. Please set money aside to pay for your care from this date.

If you move into permanent residential care, the council will pay the care home the cost of care and invoice you for your assessed contribution (determined by your financial assessment):

- You pay your assessed contribution to the council
- The council will pay the cost of care to the care home
- Anyone paying a top up will pay the top up as agreed in the top up agreement with the council.

For non-residential care, the council will invoice you in arrears every four weeks.



How to pay

Our preferred method of payment is direct debit. It is also the easiest way to pay for your care. A direct debit is an instruction from you to your bank. It authorises the council to collect the invoiced amount from your account. We will send your invoice at least ten days before the collection date so you can contact us if you need to query anything. You can cancel a direct debit at any time, but please discuss with us first.

Other payment methods, such as payment by debit card, are available if you are unable to pay by direct debit.

If you have direct payments, you must pay the amount agreed in your direct payment agreement into your direct payments Payment Card Account every month.

What happens if you don't pay

Please tell us straight away if you are having difficulty paying for your care and support. We will review your circumstances and check that your charges are correct.

The collection of contributions is vital to enable the council to maintain and develop our Adult Social Care services for people living in Gloucestershire. If you don't pay your care charges, we will take any necessary action to recover unpaid charges. We will:

- send you reminders and final demand letters to give you opportunity to pay
- refer your debt to our debt recovery team if you don't pay and can't provide a good reason for non-payment within 60 days. The debt recovery team will contact you to find out the reason for non-payment and to discuss appropriate options to bring your account up to date.

We may take legal proceedings if other attempts to recover charges fail. This may mean that you have to pay legal costs in addition to outstanding care charges.

If you have direct payments and you don't pay the agreed amount into your Payment Card Account, we may suspend or stop your direct payments and meet your needs in another way.

Section F: Fraud, deprivation of assets and misuse of taxpayer funds

The council has a legal duty to protect and prevent misuse of taxpayer funds.

We investigate all concerns about fraud, including fraud against other public bodies such as the Department for Work and Pensions (DWP), and H.M. Revenue and Customs (HMRC).

Our investigations may result in criminal prosecution and / or sharing information with other bodies.

Some people try to reduce or avoid paying care costs by:

- giving false or incomplete information during their financial assessment, or

- deliberately giving away savings, income or assets, or
- selling them for less than their true value.

This is known as 'deprivation of assets'. If we have reason to believe that someone is trying to avoid or reduce their care costs in this way, we may:

- use the true value of the asset / income in their financial assessment as if they still owned it and calculate their contribution accordingly
- take action to recover lost chargeable income from the person to whom the asset or income was transferred.



Section G: Self funding your own care charges

Arranging your care

Most people assessed as able to pay for the full cost of their care make their own care arrangements as there is no need for council involvement.

Non-residential care: You can ask the council to arrange your care for you if our Adult Social Care service has confirmed that you have eligible needs for non-residential care. You will still have to pay the full cost of your care and the council may charge a fee for this service. Our usual charging, payment arrangements and debt recovery processes apply if you wish us to continue to monitor arrangements for you after making the initial arrangements.

Care homes: If you have eligible needs for care in a care home, the council will not make arrangements on your behalf without good reason, for example if you lack capacity and have no legally appointed representative.

Care homes may charge different rates for people who are self-funding compared to those who are part-funded by the council. When choosing a care home, you should consider whether the care home will accept council rates if you are unable to continue to self fund your own care.

If you are thinking of moving into a care home in another county, it is a good idea to contact the local authority for that area before you move. They will be able to tell you what support they can offer if you run out of funds.



What to do when your funds are running low

Please contact the Adult Helpdesk about **three months** before your funds drop to £23,250. The council's online calculators can help you track this.

[https://gloucestershire.mycostofcare.com/
OFA](https://gloucestershire.mycostofcare.com/OFA)

Tell the Helpdesk that you are paying for your own care but are running out of funds. Ask for a care needs assessment. If we determine that you have eligible needs for care and support under the Care Act, we will ask you to have a financial assessment.

The council will help to fund your care if:

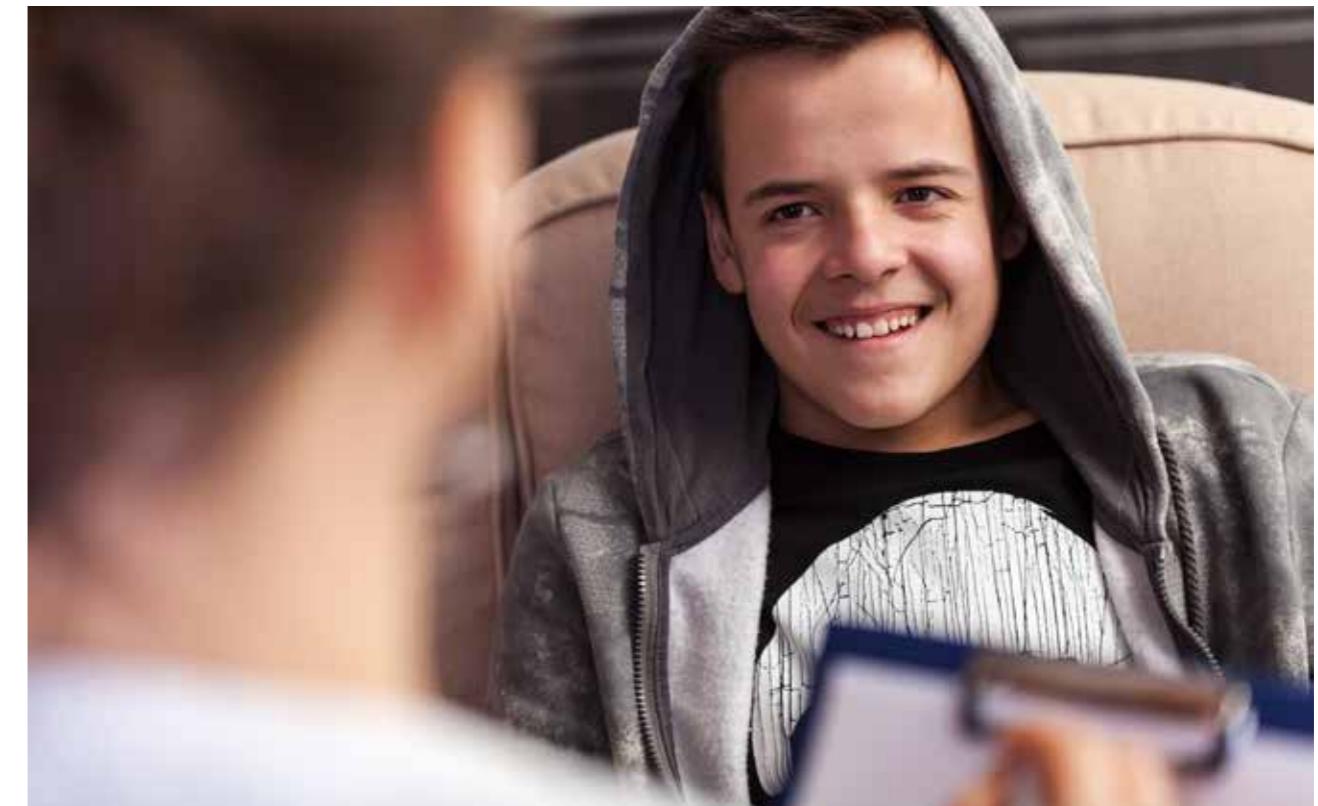
- your needs are eligible under the Care Act and
- your financial assessment confirms that you are entitled to financial support through the council.

If you qualify for financial help through the council, we can only help from the day on which your funds fall below £23,250 or the day you contact us (whichever is the later).

The council will only help to pay for what is necessary for the level of care that you need. This may not be the same as the care you have arranged and funded for yourself. For example, if you are living in a care home that costs more than is necessary to meet your needs, you may have to consider moving unless someone else is able to pay a top up for your care. Please see the council's Your Circle top ups webpage for more details:

[https://www.yourcircle.org.uk/Information/
topup](https://www.yourcircle.org.uk/Information/topup)

How to contact Adult Social Care



If you are actively working with Adult Social Care or the Financial Assessments and Benefits (FAB) Team

Contact your named Adult Social Care worker or FAB Visiting Officer in the first instance.

You can write to us at:

Address:

Adult Social Care
Gloucestershire County Council
Shire Hall
Westgate Street
Gloucester GL1 2TG

You can contact us through the Adult Helpdesk:

Website enquiry form: <https://www.goucestershire.gov.uk/adult-helpdesk-enquiry/>
Email: socialcare.enq@goucestershire.gov.uk
Telephone: **01452 426868**

Notes

Useful telephone numbers

Organisation	Telephone Number
Age UK Gloucestershire	01452 422660
Attendance Allowance	0800 731 0122
Carer's Allowance	0800 731 0297
Gloucester & District Citizens Advice Bureau	01452 527202
Disability Living Allowance (Born on or before 08 April 1948)	0800 731 0122
Disability Living Allowance (Born after 8 April 1948)	0800 121 4600
Gloucestershire Carer's Hub	0300 111 9000
Pension Credit claim line	0800 99 1234
The Pension Service	0800 731 0469
Personal Independence Payments enquiry line	0800 121 4433
Tax Credits	0345 300 3900
Universal Credit	0800 328 5644
Working Age Benefits (JSA, IS, IB, ESA)	0800 169 0310

If you would like this information in an alternative format, for example in large print, please contact the Adult Helpdesk (see page 17)

The information in this booklet is also available on our website:
[www.goucestershire.gov.uk/
paying-for-social-care](http://www.goucestershire.gov.uk/paying-for-social-care)